

## **Application Data Sheet**

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks:: 0  
Number of copies of CDs:: 0  
Title:: Determining Levels of Substances Using Multistatic Probes  
Attorney Docket Number:: FOM-139.02  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 2  
Total Drawing Sheets:: 9  
Small Entity:: No  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: U.S.  
Status:: Full Capacity  
Given Name:: James  
Middle Name:: Robert  
Family Name:: Champion  
Name Suffix::  
City of Residence:: Maryville  
State or Province of Residence:: TN  
Country of Residence:: U.S.

Street of mailing address:: 1607 Linda Lane  
City of mailing address:: Maryville  
State or Province of mailing address:: TN  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 37803

### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: U.S.  
Status:: Full Capacity  
Given Name:: William  
Middle Name:: Peters  
Family Name:: Schenk  
Name Suffix:: Jr.  
City of Residence:: Rockford  
State or Province of Residence:: TN  
Country of Residence:: U.S.  
Street of mailing address:: 9124 Lynnwood Lane  
City of mailing address:: Rockford  
State or Province of mailing address:: TN  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 37853

### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: U.S.  
Status:: Full Capacity  
Given Name:: John  
Middle Name:: O'Brien  
Family Name:: Evans  
Name Suffix:: II

City of Residence:: Powell  
State or Province of Residence:: TN  
Country of Residence:: U.S.  
Street of mailing address:: 7917 Widdecomb Road  
City of mailing address:: Powell  
State or Province of mailing address:: TN  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 37849

**Correspondence Information**

Correspondence Customer Number:: 25181

**Representative Information**

Representative Customer Number::	25181
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	an application claiming the benefit under 35 USC 119(e)	60/409,360	09/09/02